

MICHIGAN STATE ASSEMBLY OF THE ASSOCIATION OF SURGICAL TECHNOLOGISTS  
(MSA-AST)

HEALTH POLICY COMMITTEE TESTIMONY IN SUPPORT OF HB4403  
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My name is Julia Jackson and I am a certified surgical technologist. I am speaking on behalf of the Michigan State Assembly of the Association of Surgical Technologists (MSA-AST) in support of HB 4403.

AST is the professional organization for surgical technologists and the MSA is the state level organization for AST. AST and MSA seek to promote quality patient care by developing educational programs, promoting professional standards and credentials, providing a forum for the exchange of ideas, monitoring the changing health care environment, and fostering other opportunities for personal and professional growth of all surgical technologists and surgical assistants.

The surgical technologist is an allied health professional who possesses expertise in the theory and application of sterile and aseptic techniques, and who combines knowledge of human anatomy, microbiology, pathophysiology, psychology, ethics, communication, critical thinking, surgical procedures and the implementation tools and technologies to facilitate a physician's performance of invasive therapeutic and diagnostic procedures.

A certified surgical technologist functions in the traditional role called "first scrub". We are a "scrubbed" or "sterile" member of the surgical team and work directly with the surgeon throughout the surgical procedure.

The foundations of surgical technology and the cognitive process used by surgical technologists must be firmly grounded in the sciences and critical thinking. The CST serves the patient's interest primarily by providing assistance to the surgeon. The CST's primary task during an operative procedure is to predict, or anticipate, the intraoperative needs of the surgeon and the surgical patient. To accomplish this task, the CST must learn to "think like the surgeon" intraoperatively. The CST contributes to global patient care by serving as a team member who monitors the surgical environment along with the other team members. We monitor the sterile field and diligently work to avoid contaminations and errors that could harm the patient.

Surgical technology graduates are prepared in both the didactic and clinical aspects of the Core Curriculum for Surgical Technology and are educated to work specifically in the operating room. Each student completes a rigorous didactic curriculum and a clinical externship consisting of approximately 500-600 hours in the scrub role. All of the educational programs in the state of Mi are at Associate Degree level.

MSA-AST views credentialing of surgical technologists and surgical first assistants crucial to providing and maintaining quality patient care in the operating room. Validation of education and competency of the role of the CST is only accomplished through professional credentialing (certification), after graduation from an accredited program.

We feel that employing individuals as surgical technologists that have not been formally educated and have not demonstrated competency to function in the scrub role is a direct threat to safe patient care. Moreover, these individuals possess a tremendous risk management liability to the surgical team due to a lack of understanding of the principles of asepsis, perioperative phases of surgical patient care, surgical procedures, operative protocols, safe handling of sharps and biohazards, anatomy and pathophysiology, microbiology, ethical decision making, specimen handling, and medications on the field.

The absence of a foundation in any of these areas poses a threat to the patient and can compromise a positive surgical outcome. Wrong site surgery, medication errors, retained instruments or sponges because of improper counting, patient injury, and specimen handling errors, and surgical site infections can all result from an unqualified surgical technologist performing inadequately in the scrub role.

The basic steps of the cognitive process for the CST are as follows:

- Has a mental image of normal anatomy
- Makes a mental comparison of the idealized anatomy with the actual anatomy of a specific patient
- Knows an idealized operative procedure used to correct a certain pathological condition.
- Makes a mental comparison of the idealized procedure with the actual procedure being performed
- Allows for a particular surgeon's variations to the idealized procedure
- Allows for variances in anatomy, pathology, and surgeons' responses to the variances
- Predicts and prepares to meet the needs of the surgeon and surgical patient prior to the need being verbalized

Surgery is a critical aspect of patient care and a small mistake can leave a patient permanently disabled, or even dead. Invasive procedures are dangerous, and to allow untrained and uncredentialed individuals to function as a part of the surgical team is a risk that the public, in my opinion, would not be willing to accept if they were informed in advance of the surgery.

Do the hospitals and each of us involved in healthcare have a duty to provide the best possible patient care? Patient care means keeping the patient safe; "to do no harm" is an ethical principle that medicine follows without fail. Assuring that surgical technologists and surgical assistants are properly educated and credentialed to perform their respective roles is one that we have a duty not to overlook.

I feel privileged to work in health care, and to be a part of a surgical team that can help improve the quality of life for a patient. There is no better feeling than that of helping another.

When it is my three year old daughter on the operating room table, I want to know that she is not at risk of injury or death because of an avoidable error committed by an inadequately prepared surgical technologist. Are you willing to take the chance with your loved ones?

I urge you to vote in support of this important legislative effort to protect the surgical patient. Every patient has the right to certified surgical technologists and surgical first assistants on the surgical team. Thank you for your time.

Respectfully,

Julia A Jackson, CST, BAH  
MSA-AST Government Affairs Committee